



# ***Integrated Disability Evaluation System (IDES)***

Joint Venture Conference

North Charleston, SC

October 2011

VHA



**VA**  
HEALTH  
CARE | Defining  
**EXCELLENCE**  
in the 21st Century

- VA Overview

- IDES

- Visibility: SecVA/SecDef topic at joint meetings

- Keys to success:

- Know their IDES DoD and VBA counterparts
  - IDES is often “first touch” for SMs with VA
    - We must do it right.
  - Transition & Rehabilitation are part of program
  - Talking
  - Providing Value



SecVA  
Shinseki  
visiting VA  
patients

# The Fundamentals

- Delivering health care is different from healthcare delivery
  - Health care is what we provide individual patients
  - Healthcare is about the systems that enable this
- Health care is the ***art of medicine***
- Healthcare is the ***science of systems***

[Dr. Robert Jesse]



**VA**  
HEALTH  
CARE

Defining  
**EXCELLENCE**  
in the 21st Century

# The Fundamentals

In order for the *Art of Medicine* to flourish, healthcare systems must operate with high reliability !



**VA**  
HEALTH  
CARE

Defining  
**EXCELLENCE**  
in the 21st Century



# The Principles of Quality

- Quality occurs on the front line
- Culture matters more than programs
- Quality should be evidence based
- Making quality programs requires the support of high-functioning interdisciplinary teams
  - It's not about the Org Chart

♥ Leadership counts more than measures



**VA**  
HEALTH  
CARE

Defining  
**EXCELLENCE**  
in the 21st Century

# Perspective...

---

"We are dealing with Veterans,  
not procedures – with their  
problems,  
not ours."

Omar Bradley; 1947  
VA Administrator

# So what is IDES?

- It's *just like* standard Compensation & Pension (C&P)
  - Exams done by same clinicians as C&P
  - Exams done in same clinics as C&P
  - VASRD applies
    - VA Schedule for Rating Disabilities
  - Regional office staff assess by same rules
  - Role for Board of Veterans Appeals



# So what is IDES?

- It is nothing like standard C&P
  - ❑ Exams are done on active duty service members rather than Veterans
  - ❑ New players involved – MSC, PEBLO, MTF Commander, Post Commander, VA Policy and Planning, contractors
  - ❑ Different time standards
  - ❑ Different data base (VTA)
  - ❑ Different level of attention

# Why so important?

- Involves active duty service members, ill or injured, in a time of war
- For the VA – processing of these Service members represents:
  - Fulfillment to the Country of our wartime mission
  - Support for those who sacrificed
- For DoD – processing of these Service members represents:
  - Commitment to not leave a fallen warrior behind
  - Need for healthy, deployable fighting force

# Key Challenges

- Development of a common operating picture
  - Same data source
  - Same data definitions
  - Accurate data
  - Useful performance data
    - For Washington (DoD, military Services, VA)
    - For VISN
    - For Regional Offices

# Into the *Future...*

## *DBQs*

- *Disability Benefits Questionnaires* (DBQs) are being developed to improve ratings
- Collaborate with VBA C&P Service and VHA clinicians to develop ~ 80 DBQs
- Moderate 2 monthly C&P National Communication Calls
- Inform VHA C&P field leaders of upcoming DBQ releases
- Coordinate with Primary Care leadership to reach consensus on role for each new DBQ
- Collaborate with CAPRI team and Chief Business Office (CBO) to support VA electronic programming of DBQs

# Ongoing Reporting

- VA Implementation activities:
  - Assignment of a “Senior Executive”
    - VISN Directors, Regional Directors – interface w/ corresponding General Officer on IDES
    - Responsible for all IDES performance activities in their geographical areas of responsibilities
  - Bi-weekly discussions with COSVA
    - Frequent VTCs with Army
    - USMC may come online

*Welcome back ...*

